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AN OBLIGATION OF EMPIRE.

BY MARY ENDICOTT CHAMBERLAIN.

THE profession of nursing is of such importance in modern times, and science and training have done so much to develop and make it efficient, that it has become the duty of all who have it in their power to help to extend its benefits to plead its cause.

It is, therefore, desired to call the attention of the readers of this REVIEW to an Association, which has only been in existence for a few years, and whose work is but little known, but which is of such inestimable value that a brief account of it may be of some interest, not only in Great Britain, to whose colonies it ministers, but in America as well.

Recent developments of policy, arising out of the Spanish-American War, have brought before the citizens of the United States many of the problems that for generations have confronted the nation which, of all others, has been the pioneer of colonial expansion of the modern type. From the moment this policy was initiated, Englishmen have watched with the keenest interest and deepest sympathy the efforts of their kinsmen across the sea to meet the responsibilities with which they themselves are so familiar, and it may be useful to those Americans whose thoughts are turning to the consideration of new needs and new obligations to have before them some of the results of the experience which the world-wide Empire of Great Britain has afforded to her sons and daughters.

For present purposes, the experiences may be divided into two classes: those furnished by the great self-governing colonies and those furnished by the Crown colonies. It is with these last that this article is especially concerned. Situated in tropical or sub-tropical regions, their European population is chiefly confined to managers of commercial undertakings and the official class, and is, of course, very limited; while their tie with the mother country is

a closer one than that of the larger dependencies, in that they are more directly connected with her in all the administrative branches of their governments, and are often dependent on her to open and extend the avenues of their material prosperity. These countries are varied in their climates, but still more so in their peoples. Races of every color and creed inhabit them, and while to the native the climate is innocuous, to the white man it is often deadly, without those aids to life and health which he must carry with him, if his work is to be one of development and progress in the distant lands for whose civilization and advancement he has made himself responsible.

For many years excellent Government hospitals have been established in the Crown colonies, which have brought medical aid and careful nursing to the natives and poorer classes of the community; but, great as is the advantage of these institutions, their good work is of necessity restricted to nursing those within their walls. Here the responsibility of the Government ceases, and rightly ceases. All who can and will enter the wards of the hospital as patients are welcome, but in many places this is practically impossible. Very often illness occurs at long distances from the capital, where the hospital is situated, in countries where the means of travelling make it impossible for an invalid to move without grave danger to life; and even where this obstacle does not exist, there are frequently objections, which long residence among alien races does not make it easier to overcome. For educated Englishmen or their wives to find themselves in a hospital among natives or other uncongenial companions, is an ordeal from which they may well shrink. In small communities the accommodation does not always permit of the multiplication of wards, and thus the divisions which in a large hospital at home are a matter of course are an unheard-of luxury.

Terrible hardships are often the result. Delicately nurtured women are exposed to suffering and peril which are inconceivable; little babies are left neglected and spend their brief lives in pain which might so easily have been saved; strong men, who have never had to think of themselves are struck down by that baleful and deadly foe, tropical fever, far away from all the comforts to which they have been accustomed, with no friend at hand, with no white woman within reach—only natives near them, who are totally incapable of carrying out any directions which the weary

doctor on his long rounds leaves during the visits which he is only able to make at rare intervals. The terror of helpless loneliness is added to the misery of a wasting disease.

From time to time in the past, efforts have been made in various places to secure a private nurse, and sufficient money has been raised to get one from England; but, as a rule, these attempts have failed, owing to the impossibility of making satisfactory investigations and engaging the nurse under a proper guarantee, or from other causes. The money once expended could not be replaced, and those who had tried in vain to make this provision were discouraged.

Such a condition of affairs as this prevailed in the Island of Mauritius when Mrs. Francis Piggott, whose husband is a distinguished member of the Colonial Service, went to live there. The crying evil that, in a colony where the well-to-do classes could afford to pay for the services of a trained nurse, there were no adequate means of nursing cases of serious illness, was brought forcibly home to her mind by the death of three young Englishmen on one plantation alone. In each case it was evident that, had proper care been available, there would have been every chance of recovery. Her own experience in going to the assistance of friends—a young officer whose wife was ill, and whose child was at death's door, while their only attendant was an ignorant native woman—still further convinced her that the time had come to make an organized effort to supply a deficiency which was fraught with such serious consequences to the lives of our fellow countrymen abroad.

She immediately began to gather information from Colonial Governors, medical officers, and others competent to give her advice in working out the problems with which she had decided to deal. By the time she came home, in 1895, she had already formed the basis of a scheme, and it only remained to enlist the sympathy and support of those who could help to make it successful. Mrs. Piggott's private friends did much to assist her at the outset, and it was not long before a fund of several hundred pounds was raised with which to begin work. But more than this was required. She felt that, in attempting to carry out an experiment of this kind, it was essential to success to have the moral support which the Colonial Office could give. Accordingly, while the scheme was still in its infancy, it was submitted to the authorities, who saw

that the need which she described was great, and that there was much scope for useful work in the direction she proposed. They promised to do all in their power to assist her, and suggested some slight alterations calculated to make the plan more practicable. These were accepted, and in the summer of 1896 the first general meeting of the Colonial Nursing Association was held. Already it had begun its work; for, during the spring, Mauritius had benefited by the first contributions which Mrs. Piggott had received, and two private nurses had been sent out, their passages being paid and their salaries of £60 a year guaranteed by the Association. At this meeting it was announced that the Secretary of State for the Colonies had given his official recognition to the scheme by sending a circular despatch to all the Governors of the Crown colonies, inclosing the papers of the Colonial Nursing Association, and recommending it to their consideration.

This led to renewed interest in the subject of nursing within the colonies themselves. The Gold Coast voted money for the establishment of three trained nurses in the Government Hospital, and before the end of the year the Colonial Office applied to the Colonial Nursing Association to select them. Lagos, where there had already been two English nurses, asked for a third, and Sierra Leone soon followed this example. The Colonial Nursing Association thus received an impetus which has been of the utmost value to it; for, though its main object from the first has been to provide private trained nurses for the Crown colonies and British communities abroad, it is a great advantage to be called upon by the Colonial Office to recommend nurses for the various Government hospitals. It helps to give wider experience of the requirements of the different colonies, and may, in the future, pave the way for placing private nurses where they are most needed. On the other hand, the Colonial Office is relieved of the difficult task of interviewing and selecting nurses; and, as long as the Association exercises a wise discretion in the recommendations it makes, there is every reason to believe that this official co-operation with a private enterprise is likely to continue.

When the Association was originally started, Mrs. Piggott was fortunate in being able to interest H. R. H. the Princess Henry of Battenberg, who consented to become its Patron, while Lord Loch, whose experience in colonial affairs made him a most valuable acquisition, undertook to be its President. A small Com-

mittee of Management, with Mrs. Piggott as Honorary Secretary, was the working body, and for three years this arrangement was not disturbed. These three years witnessed a great advance in the development of the work. Private nurses were applied for by many colonies, and the Colonial Office made further requests for hospital nurses. The increase of work made it necessary to enlarge the committee, and in 1899 more formal rules were adopted. The Association was inaugurated under the same President, with a Council, an Executive Committee, and honorary officers. The Executive Committee then appointed three sub-committees—the Colonial, Finance and Nursing Committees—which now deal with the details of the work that formerly devolved upon the Committee of Management, and leave the present Executive Committee free to devote itself to the larger questions of principle and administration.

Through the medium of the Colonial Committee, the Association is placed in communication with the colonies requiring nurses. It conducts the correspondence with the people interested in the project, induces them to form local committees to undertake the supervision of nurses and to raise funds, and is often able to stimulate them to make efforts in this direction, which would be impossible had they no assurance that the arrangements on this side would be satisfactory. Success in raising money varies with the resources of the different colonies, but when the Association is satisfied that all has been done which is possible under the circumstances it endeavors to meet the local committee by making a grant to it. Sometimes the committee on the spot undertakes to pay the salary and maintenance of the nurse, while the Association pays her passage out or guarantees this last until it can be repaid by the colonists; sometimes, the colony is only able to provide the maintenance, and the rest of the cost falls on the Association; or else the Association binds itself to provide any deficit there may be, within certain limits. Each agreement differs a little from the other, and it is the aim of the Association to help people to help themselves, rather than to make it easy to receive such a boon as it gives without any personal sacrifice on the part of the recipients. At the same time, experience shows that when once a nurse is installed she soon wins her way to the gratitude of the residents, who discover the blessing of the trained care she can give; and the contrast to the former state of absolute helplessness

is so great that they are much more ready to contribute to her support than when the proposal to do so is first suggested to them. Accordingly, when a new nurse is called for, the Association is encouraged to be as generous as its means will allow in making the arrangements for the first year.

A monthly column in a paper called *Nursing Notes* helps to make the Association known in the nursing world; but from the beginning there has been little difficulty in the supply of nurses, who apply, as a rule, on their own initiative. The candidates are interviewed before their names are taken, and there is now a long list on the books of the Association of nurses who may be called upon at short notice.

Whenever a vacancy or a new demand arises, the nurses available are sent for by the Nursing Committee, and the utmost care is taken to ascertain not only their professional qualifications, as to which a three years' certificate from one hospital and a midwife's certificate are required, but also their antecedents and everything which can bear upon their personal character, as this is a most important element for consideration before sending them so far away from the restraining influences of home. If it be possible to secure the advice of any lady from the colony who may happen to be in England at the time, she is invited by the committee to be present at the interview with the nurses, in order that full information may be given as to the climate and conditions of life in the place to which they are to be sent. When the appointment is for a Government hospital, the Association assumes no financial responsibility in regard to it. As soon as the nurse takes it up, she comes under the regulations for Government servants, and her salary and all expenses are paid by the colony in which she is employed. If, on the other hand, it is for a private nurse, she is obliged to sign an agreement to abide by the terms and regulations of the Colonial Nursing Association and to obey the rules of the local committee. These afford sufficient guarantees that in the event of her breaking her engagement without due cause, the Colonial Nursing Association will not suffer financial loss—a provision which the past experience of benevolent individuals who had occasionally attempted to get a nurse from England showed to be most necessary. The salary of these nurses is never less than £60 a year, and whether it is paid by the Association or the colonists depends on the particular arrangement which has been

arrived at between the Colonial Nursing Association and the local committee. The selection of a nurse by the sub-committee is always subject to her being declared medically fit for the post to which she is going, and in order to insure that no woman shall be exposed to an unhealthy climate without the sanction of a medical officer who has experience of the tropics, the Association requires that she shall be examined by a doctor of their own choice. Dr. Patrick Manson, Medical Advisor of the Colonial Office, who examines all candidates for the Colonial Service, has kindly undertaken this task for the private nurses as well, and thus the Association is able to discharge a responsibility which it feels to be a great one, with full confidence that the nurses sent out under its auspices will not be submitted to physical risks which can be avoided. When the candidate is finally chosen, an allowance for her outfit is sometimes made, and the Association arranges for her passage out, a second-class ticket being provided. In some cases, through the liberality of the steamship companies, her fare is at a reduced rate.

It is a satisfactory sign that so many highly qualified women are ready and eager to take posts in unhealthy climates, under conditions so different to those to which they have been accustomed. How different can best be gauged by the accounts which they themselves send home. Letters from Nassau, Perak and Kwaior Lumpor in the Malay States, Mauritius, Ceylon, Lagos in the West Coast of Africa, Gebba and Lokoja in Nigeria, coming from private as well as hospital nurses, tell of the details of their work, and the obstacles which they encounter. For instance, the hospital nurses speak of their laborious efforts to train and make use of the native attendants, who, after long hours of patient teaching, are discovered manufacturing poultices with tepid water and applying them to the unfortunate patient at random; and of the hopelessness of instilling any lasting knowledge of the simplest processes into the native mind, so that constant supervision and unflagging vigilance are necessary. Cases of all kinds come to them, from the Englishman who has fallen a prey to the ravages of fever, to the poor young native woman whose husband had tried to murder her, and who lay for eight hours more dead than alive before she was brought into hospital to have her thirty wounds bound up and treated, and her fractured arm set. Her nurse writes: "I am very proud of her, as no one but myself has touched her since the

first morning. She is now quite well, except for the fracture. It will now be put in splints. The arm was so badly hacked we could not put it in splints, owing to the number of wounds to dress. She was hacked with a short, dirty, grass-cutting knife. When her supposed husband was asked why he did it, he replied he only gave her a few little cuts to frighten her. She was wife No. 2, and very young and pretty. Three of her lovely teeth have gone, too." Such a narrative throws a side-light on the manners and customs which may be met with in the East. The cottage hospitals set down amid beautiful tropical surroundings sound very attractive, but occasionally their furnishing leaves much to be desired, and the nurses have many inconveniences to put up with, besides their difficulties in coping with the native dressers. The private nurses, too, find themselves in strange places—if they are single-handed, one case follows another so quickly that it is hard for them to feel they have done justice to all. One writes of having been called to a serious case of typhoid two hours after her arrival in Ceylon, and others find cases booked for months in advance. Their time is largely occupied by maternity cases and various forms of fever, and they have the satisfaction of knowing that they are able to save many valuable lives. They themselves feel that the strongest plea for their services is the desperate plight in which they often find young men on distant estates, ill to the point of death with enteric fever, isolated from all friends, the doctor only able to visit them once a day, and their native servants ready to be kind, but too ignorant and superstitious to be relied upon for intelligent care. The timely arrival of the nurse from home has, in many instances, averted fatal consequences from the complications which such a state of neglect brings about. The prevailing tone which runs through all the correspondence from which these facts are gleaned is one of cheerful readiness to do their duty, and it is a tribute to the unselfish devotion of English nurses that they know how to make the best of the circumstances in which they find themselves, and are not easily discouraged when their path is beset by unforeseen trials.

But, while the functions of these Colonial and Nursing Committees are the most interesting, equally important are those of the Finance Committee.

Until last year, the funds were entirely derived from the sum originally raised by Mrs. Piggott and a few annual subscriptions.

The necessities of the work require that there should always be a certain floating capital, which can be drawn upon at any moment to meet a sudden demand for outfit, passage-money, etc., which cannot be estimated beforehand, but which often needs a large sum at once. As a general rule, this sum is advanced as a loan, and is refunded as soon as the nurse arrives in the colony; but it may also be that the Association must wait for months before the local committee is in a position to repay its debt. As the list of subscriptions is not long, it was felt it would be a great advantage to have a small endowment fund, from which a regular income would accrue, and thus make the Association less dependent on the fluctuations of popular support. Accordingly, it was decided by the Executive Committee to endeavor to raise a fund of £5,000 for investment. An appeal was made to the public, and although a certain proportion of this modest sum was obtained, donations have recently very largely fallen off in consequence of the numerous demands made upon the public in connection with the war in South Africa. It is much to be hoped that the whole of this amount may before long be in the hands of the Trustees.

In July, 1899, the annual meeting of the Association was held at Stafford House. Lord Loch presided, and the resolution adopting the report was moved by the Secretary of State for the Colonies and seconded by Mr. Asquith, Home Secretary of the late Government. Both expressed their conviction that the field of work was ripe for the harvest, and in his official capacity, Mr. Chamberlain testified to the appreciation which the officials felt for the exertions of the society, and quoted a letter from Colonel Wilcox, in command of the West African frontier force on the Niger, "who had paid a high tribute to the value of the services rendered by the ladies who undertook these labors in connection with the force under his command, and declared his belief that the recovery of some of the young officers from the deadly black water fever was due mainly to the care and the attention of the nurses sent out by the Association."

Since the first appointments were made in 1896, fifty-eight nurses have been sent out by the Colonial Nursing Association, of whom twenty have been private nurses and thirty-eight hospital nurses. The former are employed in Ceylon, Cyprus, Dominica, East Griqualand, Japan, Mauritius, Perak, Selangor, Singapore, and also at Bangkok, where there is a nursing home for which

the Queen of Siam, who is much interested in it, has given a house, on the understanding that they shall train several Siamese women every year. The latter are in Accra, the Bahamas, Cape Coast Castle, Ceylon, Cyprus, Hong-Kong, Lagos, Northern Nigeria, Old Calabar, Perak, Selangor, Sierra Leone, Singapore and Trinidad. In Accra, Bangkok, Hong-Kong, Lagos, Old Calabar and Sierra Leone there is a provision which permits the nurses to go out to take care of private cases, when occasion arises. This touches a point which the committee keeps before it as an ideal—viz.: that in the future every hospital or nursing home which receives support from Government funds should have rooms attached to it which can be the headquarters of nurses whose first duty will be to devote themselves to private cases, and whose time, when not employed in this way, can be given to work in the hospital. This would greatly simplify the question of proper lodgings for the private nurses when they are disengaged—a problem which in some remote places it is not easy to solve.

Simultaneously with the work of this Association special efforts have been made, both by private individuals and Her Majesty's Government, to establish schools of tropical medicine, and to promote investigations into the causes of tropical diseases. A school has been started at the Dreadnought Hospital at the Royal Victoria and Albert Docks at Greenwich, assisted by a grant from the Imperial Government, and there is also one at the Royal Southern Hospital at Liverpool. Both places afford unusual facilities for the practical study and treatment of these disorders, as ships constantly return to the docks with severe cases on board which are at once removed to the hospitals.

The Colonial Nursing Association has arranged with these hospitals to take a certain number of their nurses for a short course of special instruction. Already a preference is given by the Association to those who have undergone this supplementary training, and, in the near future, it is probable that no nurse will be sent to the more dangerous climates who has not had the advantages of this experience.

The work which has been described in the preceding pages may appear to be unimportant in comparison with much that is done in the large charitable institutions which abound in the great cities of England and America; but, nevertheless, it is not one of the least of the obligations of empire.

The control of the tropics devolves more and more on the Anglo-Saxon race, and it carries with it the responsibility for the civilization and welfare of the vast populations which turn to English-speaking people for protection and good government.

This duty can only be satisfactorily discharged by men of character and ability, who will bring to their work the best qualities of their race.

The lives of such men are precious, and any organization which will help to preserve them will tend to make the task of administration in tropical countries more easy, and to lighten the burden which empire must bring.

MARY ENDICOTT CHAMBERLAIN.